



217/782-6761

CERTIFIED # P956388623

Refer to: 0316005924 -- Cook County  
Foseco Inc.  
ILD051067866  
COMPLIANCE INQUIRY LETTER

January 26, 1989

Foseco Inc.  
Attn: R. Rae  
10823 S. Langley Avenue  
Chicago, Illinois 60628

EPA Region 5 Records Ctr.



324148

Dear Mr. Rae:

A review of Agency files has revealed that your company may be in apparent violation with 35 Ill. Adm. Code 722.141(a).

Pursuant to 35 Ill. Adm. Code 722.141(a), a generator who ships any hazardous waste off-site to a treatment, storage or disposal facility within the United States shall prepare and submit a single copy of an annual report to the Agency by March 1 for the preceding calendar year. The annual report must be submitted on a form supplied by the Agency, and must cover generator activities during the previous calendar year, and must include the following information:

1. The USEPA identification number, name and address of the generator;
2. The calendar year covered by the report;
3. The USEPA identification number, name and address for each off-site treatment, storage or disposal facility in the United States to which waste was shipped during the year;
4. The name and USEPA identification number of each transporter used during the reporting year for shipments to a treatment, storage or disposal facility within the United States;
5. A description, USEPA hazardous waste number (from 35 Ill. Adm. Code 721. Subpart C or D), DOT hazard class and quantity of each hazardous waste shipped off-site for shipments to a treatment, storage or disposal facility within the United States. This information must be listed by USEPA identification number of each off-site facility to which waste was shipped;
6. A description of the efforts undertaken during the year to reduce the volume and toxicity of waste generated;



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7. A description of the changes in volume and toxicity of waste actually achieved during the year in comparison to previous years to the extent such information is available for years prior to 1984;
8. The certification signed by the generator or the generator's authorized representative.

You are in apparent violation of 35 Ill. Adm. Code 722.141(a) for the following reason(s): your company's 1987 Generator Report has not been received at the Agency.

Please send an explanation and your Annual Report within (15) fifteen calendar days of the date of this letter.

All responses are to be mailed at the letterhead address to the attention of Hope Wright.

Take notice that non-compliance with the Illinois Environmental Protection Act and the Rules and Regulations of the Illinois Pollution Control Board may be the subject of the Enforcement action pursuant to Title VIII of Section 42(b)(3) "civil penalty of not to exceed \$25,000 per day of violation, and Section 44(a)" it shall be a Class A misdemeanor to violate this Act..."

In addition, please be advised that this letter constitutes the notice required by Section 31(d) of the Illinois Environmental Protection Act prior to the filing of a formal complaint. The cited Section of the Illinois Environmental Protection Act requires the Agency to inform you of the charges which are to be alleged and offer you the opportunity to meet with appropriate officials within thirty days of the notice date in an effort to resolve such conflicts which could lead to the filing of a formal complaint.

For any questions concerning this letter please contact Hope Wright at the above number.

Sincerely,

Eugene P. Theios, Manager  
Administrative Compliance Unit  
Compliance Section  
Division of Land Pollution Control

EPT:HW:rmi/0287k/22-23

cc: Division File  
Maywood Region

0316005924 - Fosco Inc.

<p>● <b>SENDER:</b> Complete Items 1 and 2 when additional services are desired, and complete Items 3 and 4.</p> <p>Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. <u>The return receipt fee will provide you the name of the person delivered to and the date of delivery.</u> For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. <span style="margin-left: 100px;">2. <input type="checkbox"/> Restricted Delivery</span></p> <p style="text-align: center;">↑(Extra charge)↑ <span style="margin-left: 100px;">↑(Extra charge)↑</span></p>	
<p>3. Article Addressed to:</p> <p><i>Fosco Inc.</i>  <i>Attn: R. Rae</i>  <i>10523 S. Langley Ave.</i>  <i>Chicago, IL 60628</i></p>	<p>4. Article Number</p> <p><i>P956388673</i></p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <span style="margin-left: 50px;"><input type="checkbox"/> Insured</span></p> <p><input checked="" type="checkbox"/> Certified <span style="margin-left: 50px;"><input type="checkbox"/> COD</span></p> <p><input type="checkbox"/> Express Mail</p> <p>Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b></p>
<p>5. Signature - Addressee</p> <p>X <i>[Signature]</i></p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature - Agent</p> <p>X <i>[Signature]</i></p>	
<p>7. Date of Delivery</p> <p><i>1/30/89</i></p>	

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



**SENDER INSTRUCTIONS**

Print your name, address, and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE  
USE, \$300

RETURN  
TO



Print Sender's name, address, and ZIP Code in the space below.

Illinois Environmental Protection Agency

P.O. Box 19276 Mail Code #

Springfield, IL 62794-9276



P 956 368 673 *24*  
 RECEIPT FOR CERTIFIED MAIL  
 NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL

*Return Receipt Reverse!*

Sent to <i>Falco Inc.</i>	
Street and No. <i>1083 L Langley Ave.</i>	
P.O. State and ZIP Code <i>Chicago, IL 60624</i>	
Postage <i>\$ 1.05</i>	
Certified Fee <i>.85</i>	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered <i>96</i>	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees <i>\$ 2.80</i>	
Postmark Date <i>SEP 1984</i>	

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1. If you want this receipt postmarked, stick the gummed stub to the right of the receipt. Then, with the receipt attached and present the article at a post office service window to obtain a postmark (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub to the right of the receipt, sign the article, date, detach and retain the receipt, and sign the article.
3. If you want a return receipt, write the certified mail number, add your name and address to the return receipt card, Form 3811, and attach it to the front of the article by the side of the postage stamp or stamps. Otherwise, affix to back of article, beneath front of piece, **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, attach an authorized agent of the addressee to the **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate blocks on the front of this receipt. If a return receipt is requested, check the appropriate blocks in section 5 for extra charges.
6. Save this receipt and present it if you make inquiry.

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